

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CA (AMBULATORY)

Facility Information

Facility Name: BELL THERAPY HAMPTON (310104)

Address: 4901 N 106TH ST, MILWAUKEE, WI 53225

License Status: REGULAR

Licensed/Certified/Registered 11/21/1988

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0092986 **End Date:** 07/13/2004 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009006

Deficiencies Cited
83.33(3)(b)2.d

Subject Area
MEDICATION STORAGE SHALL BE LOCKED

Compliance
Verified

Corrected

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